


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 09, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V39701</b> 1. Entity Name <b>AIRFLO GARAGE DOOR SCREENS, INC.</b>	
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Principal Place of Business <b>7361 INTERNATIONAL PL UNIT 405 SARASOTA, FL 34240 US</b>	Mailing Address <b>7361 INTERNATIONAL PL UNIT 405 SARASOTA, FL 34240 US</b>
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**DO NOT WRITE IN THIS SPACE**



03082008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0337498</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

**SFERRA, CARL  
7361 INTERNATIONAL PLACE  
UNIT 405  
SARASOTA, FL 34240**

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IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>1100000867186</b> <b>04/21/08-80010-010 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SFERRA, CARL 4608 WEYBRIDGE SARASOTA, FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SFERRA, ANNE 4608 WEYBRIDGE SARASOTA, FL</b>
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carl Sferra **4/6/08 (941) 907-8988**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #